



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3727

<b>SERIAL NUMBER</b> 10/756,995	<b>FILING OR 371(c) DATE</b> 01/14/2004 <b>RULE</b>	<b>CLASS</b> 015	<b>GROUP ART UNIT</b> 1744	<b>ATTORNEY DOCKET NO.</b> 102434-200
------------------------------------	---	---------------------	-------------------------------	--

**APPLICANTS**  
 William H. Fulton, Newtown, CT;  
 William F. Thiessen, Newtown, CT;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/440,248 01/14/2003 *yes sk*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*none sk*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 03/08/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 2
---	---	-------------------------------	----------------------------	--------------------------	--------------------------------

Verified and Acknowledged  
 Examiner's Signature: *SKM* Initials: *SK*

**ADDRESS**  
 27267

**TITLE**  
 Probe pin cleaning system and method

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---